

Noble Eagle Sailor Advocacy (NESA)

EXTENSION AGREEMENT – Current Command

Member's Full Name (Please print) _____

Rank / Rate: _____ **SSN:** _____

I agree to voluntarily extend a second year at my current location identified below. I understand that based on my decision to extend into an authorized billet requirement, I will be receiving an order modification that will continue me on involuntary NOBLE EAGLE/ ENDURING FREEDOM partial mobilization recall orders. I fully understand that once the order modification is generated, I will be serving based on the needs of the Navy, and I will serve until released by proper military authority. I understand that my service under these partial mobilization orders cannot exceed a cumulative total of 24-months. I acknowledge that based on the Navy's needs, I may be released by the Navy at any time within my one-year extension.

I have fully read and understand the above.

(Initial)

I agree to extend at my present command.

(Initial)

Command UIC _____

Member (Signature)

Date

Command Endorsement (CO, XO or Operational Support Officer)
(Signature and printed name)

Date

Contact Telephone #/ E-mail: _____

Once completed, fax to (901) 874-4683 or DSN (312) 882-4683